

# COAST Foundation

## Recertification Audit – Summary Report 2022/07/20

### 1. General information

#### 1.1 Organisation

Type	Mandates	Verified	
<input type="checkbox"/> International <input checked="" type="checkbox"/> National <input type="checkbox"/> Membership/Network <input type="checkbox"/> Direct Assistance <input type="checkbox"/> Federated <input type="checkbox"/> With partners	<input checked="" type="checkbox"/> Humanitarian <input checked="" type="checkbox"/> Development <input checked="" type="checkbox"/> Advocacy	<input checked="" type="checkbox"/> Humanitarian <input checked="" type="checkbox"/> Development <input checked="" type="checkbox"/> Advocacy	
<b>Head office location</b>	Dhaka, Bangladesh		
<b>Total number of programmes</b>	14	<b>Total number of staff</b>	1462 (473F/989M)

#### 1.2 Audit team

<b>Lead auditor</b>	Nik Rilkoﬀ
<b>Second auditor</b>	Lisa Partridge
<b>Third auditor</b>	
<b>Observer</b>	
<b>Expert</b>	
<b>Witness / other</b>	Isfat Jahan Monalisa - A consultant hired in Bangladesh to facilitate and report on community conversations

#### 1.3 Scope of the audit

<b>CHS Verification Scheme</b>	Certification
<b>Audit cycle</b>	Second
<b>Phase of the audit</b>	Recertification
<b>Coverage of the audit</b>	Entire organisation and all its activities including advocacy
<b>Extraordinary or other type of audit</b>	n/a

#### 1.4 Sampling\*

Randomly sampled project sites	Included in final sample	Replaced by	Rationale for sampling and selection of sites	Onsite or remote
#1 (Education/UNICEF) Camp: 14, Khiya, Upazilla, Cox's Bazar District.	Yes		Has not been previously sampled. Humanitarian response in Rohingya refugee context. Completion December 2021, extended in March 2022.	Remote and onsite by local consultant
#6 Aligning Communities of Cox's Bazar for Optimum Resilience and Development (ACCORD).	Yes		Development programme being implemented until November 2022.	Remote

#8 Accelerating Protection for Children and Adolescent Programme in Bhola (APC) Sadar, Lalmohon, Charfession and Monpura Upazilla of Bhola district.	Yes		Has not been previously sampled. Development programme. Earlier audits had recommended sampling a programme in Bhola district which has not previously been visited. Programme being implemented until May 2022.	Remote
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**Any other sampling performed for this audit:**

Purposive sampling was applied because COAST has 14 programmes to choose from and many have already been sampled for audits over the past four years, limiting the choice for a new sample. Further limiting the number of programmes, is that many were due for completion in December 2021. In order to identify programmes that were not previously sampled, to represent both humanitarian and development programmes and to be in locations not previously sampled, a purposive sampling method was most suitable.

During the period of the audit where interviews were scheduled, one of the sample projects was in-between contracts, however staff from this project were still working within COAST. Thus, staff from all three sampled projects were interviewed. By the point in the audit where community conversations were scheduled, the education programme had been re-contracted, and interviews with affected populations took place in re-opened Learning Centres. All three sampled programmes were included in the document review.

**Sampling risk:** The auditors trust the information collected through the sampling methodology. As the audit team was unable to conduct staff and community interviews in person, they were unable to formally request interviews with additional respondents or to have impromptu conversations with random respondents, in order to triangulate the interview responses. This risk has been managed by the systematic triangulation of the information through documents review. Additionally, a national consultant was engaged to facilitate face-to-face community consultations.

*\*It is important to note that the audit findings are based on a sample of an organisation's country programmes, its documentation and observation. Findings are analysed to determine an organisation's systematic approach and application of all aspects of the CHS across different contexts and ways of working.*

## 2. Activities undertaken by the audit team

### 2.1 Locations Assessed

Locations	Dates	Onsite or remote
Principal Office, Dhaka	2022/03/13 – 2022/04/05	Remote
Barisal	2022/03/28	Remote
Bhola	2022/03/24 – 2022/03/27	Remote
Cox's Bazar	2022/03/22 – 2022/03/29	Remote

### 2.2 Interviews

Position / level of interviewees	Number of interviewees		Onsite or remote
	Female	Male	
<b>Principal Office</b>			
Management	1	9	Remote
Staff	1	7	Remote
<b>Project Office(s)</b>			

Management	0	0	Remote
Staff	4	11	Remote
Others	1	0	Remote
<b>Total number of interviewees</b>	<b>7</b>	<b>27</b>	<b>Total 34</b>

### 2.3 Consultations with communities

Type of group and location	Number of participants		Onsite or remote
	Female	Male	
Group #1 – Male teachers, Cox's Bazar, UNICEF Education project		11	Onsite
Group #2 – Female teachers, Cox's Bazar, UNICEF Education project	10		Onsite
Group #3 – Male learners, Cox's Bazar, UNICEF Education project		11	Onsite
Group #4 – Female learners, Cox's Bazar, UNICEF Education project	11		Onsite
Group #5 – Male parents & caregivers, Cox's Bazar, UNICEF Education project		9	Onsite
Group #6 – Female parents & caregivers, Cox's Bazar, UNICEF Education project	9		Onsite
Group #7 – Male Learning Centre Management Committee members, Cox's Bazar, UNICEF Education project		10	Onsite
Group #8 – Female Learning Centre Management Committee members, Cox's Bazar, UNICEF Education project	10		Onsite
<b>Total number of participants</b>	<b>40</b>	<b>41</b>	<b>Total 81</b>

### 2.4 Opening meeting

<b>Date</b>	2021/10/15
<b>Location</b>	Remote
<b>Number of participants</b>	3
<b>Any substantive issues arising</b>	None

### 2.5 Closing meeting

<b>Date</b>	2022/04/07
<b>Location</b>	Remote
<b>Number of participants</b>	18
<b>Any substantive issues arising</b>	None

### 2.6 Project site(s)

**Briefing:** N/A

**De-briefing:** N/A

### 3. Background information on the organisation

#### 3.1 General information

COAST Foundation (COAST) is a national NGO based in Bangladesh established in 1998. COAST's Principal Office is located in Dhaka and it implements programmes in the coastal areas of Bangladesh.

COAST's Vision is 'for a world of equality and justice where human rights and democracy are the social cultures'. COAST's Mission is to facilitate the sustainable and equitable improvement of life, especially of women, children and disadvantaged population of the coastal areas in Bangladesh through their increased participation in the socio-economic, cultural and civic life of the country. Its portfolio of programmes include microfinance, primary health care, development and disaster response.

COAST's current strategic plan covers the period of 2020-2024 and includes an organisation-level strengths, weaknesses, opportunities and threat (SWOT) analysis that informs the managerial and operational objectives for the period. The process of strategic review and renewal is underway for the next period, with external consultants supporting the identification of progress against the current period's objectives and identifying priorities for the new strategic period. This involves report and document review, consultation with staff and stakeholders, renewed SWOT analyses and, for the humanitarian section, COAST staff self-assess against CHS performance to learn from experiences and inform plans in the next period.

COAST is registered with the NGO Affairs Bureau of Prime Minister's Office (No. 1242) and the Microcredit Regulatory Authority, Bangladesh Central Bank (No. 00956-04041-00068). COAST is operated and staffed by Bangladeshi personnel.

In 2020-2021 COAST expended USD7.7M on staffing and administration, USD1.9M on programme costs (development and humanitarian) and USD57.3M was dispersed through microfinance loans to 141,000 families.

The initial certification audit of COAST took place in October 2017 and was followed by maintenance audits in November 2018 and December 2020, with the Mid Term Audit in June 2019.

#### 3.2 Governance and management structure

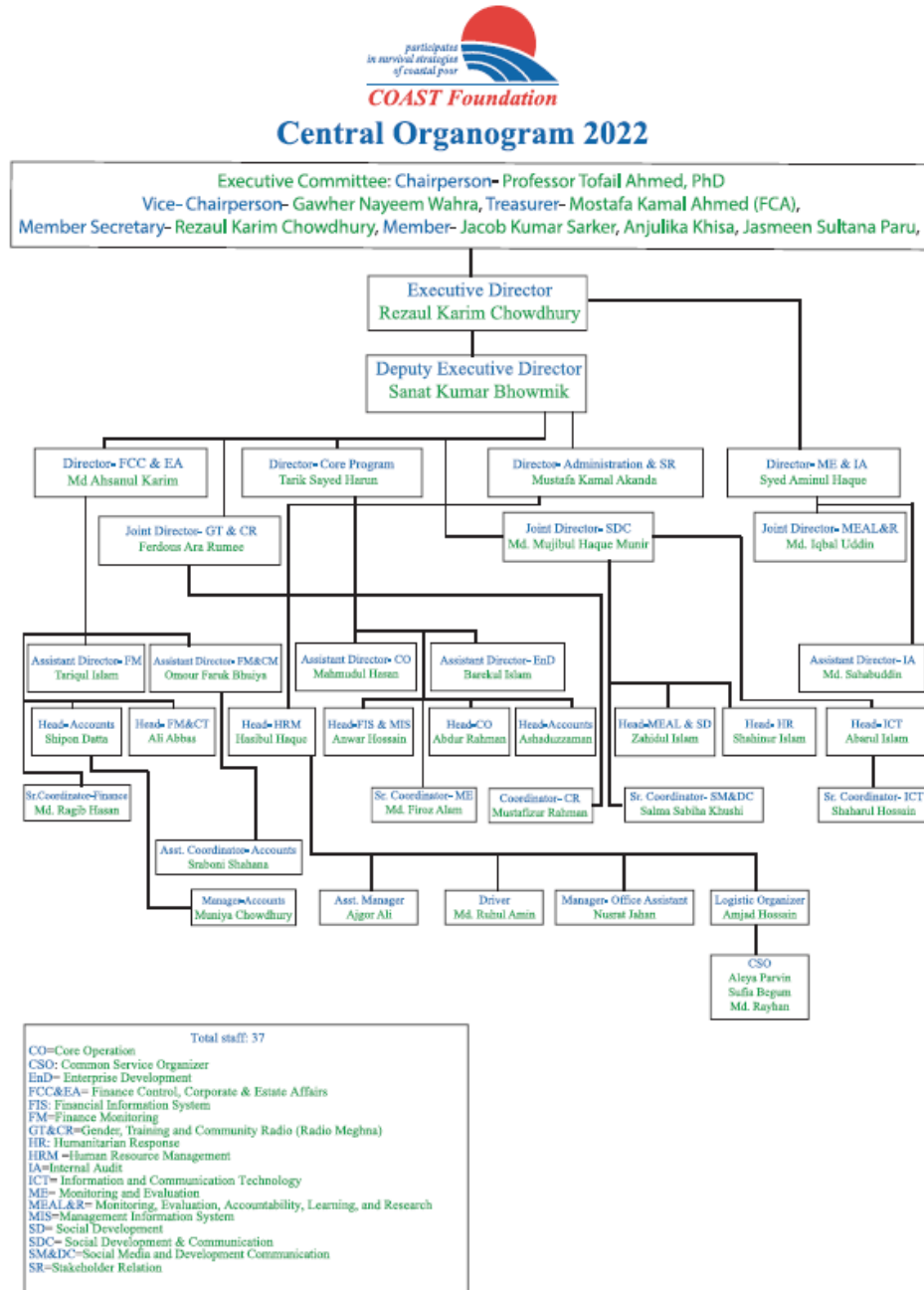
In February 2021, COAST changed its structure from that of a Trust to a Foundation that is registered under the Bangladesh Societies Registration Act and with the NGO Affairs Bureau under the Prime Minister's Office.

As a result, COAST is now governed by a General Committee (GC) and an Executive Committee (EC). As per COAST's new governing instrument, its Memorandum of Association and Rules and Regulations, at the time of signing (February 2021), the GC had 21 members (13 males, eight females) and the EC had eight members (six males, two females). The GC appoints the EC. The GC meets annually to approve the strategic plans and budget for the coming year, and approves the annual audit report. The EC meets at least four times per year, appoints the Executive Director (ED), approves operational policies and appoints the annual audit firm. Minutes of EC meetings are publicly available on the COAST website. At a management level, the ED is supported by a Senior Management Team (SMT). The SMT consists of the ED, Directors, Joint Directors, Deputy Directors and Assistant Directors.

The People's Organisation (PO) structure is a community institution comprised of elected members of COAST's micro-finance programmes. Two elected representatives from the PO are on the GC providing a link between communities and the governance of COAST. The microfinance structure starts with 20-30 women in a group, 70-80 groups in a branch that also includes 8-9 branch staff including a manager. There are 5-6 branches in an area that is managed by an area manager, and 3 or 4 areas combine into a region, overseen by a Regional Program Manager. Seven people from the branches are elected biennially and participate in PO management meetings for the microfinance programme.

To support the management of the work outside of Dhaka, each project has a Project Implementation Unit and Project/Programme Coordinator/Manager, that report to a focal point in the Principal Office. In the two main regions of Bhola and Cox’s Bazar, Regional Team Leaders are appointed to support decentralised, administrative management and act as administrative supervisors of the project leaders. These Regional Team Leaders are also responsible for representing the organisation at a regional level to Government and other stakeholders.

An organogram of the Principal Office is presented below:



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### **3.3 Internal quality assurance mechanisms and risk management**

COAST's quality assurance and internal control systems and processes include internal audit, organisational monitoring and evaluation processes, and regular group contact points where financial and implementation levels are discussed.

A Joint Director is responsible for COAST's Monitoring, Evaluation, Accountability and Learning (MEAL) and Research department. Implementation of the CHS is overseen from this department, but supported by and reported to the SMT. The Principal Office Staff Coordination Meetings (POSCM) involve regular meetings between staff to review priorities and communicate achievements. Both SMT and POSCM meetings are held fortnightly.

Monitoring methods "on-site" include quarterly focus group discussions with beneficiaries, staff monitoring and information coming from the complaint response mechanism. Off-site monitoring includes Project Performance Monitoring Meetings (PPMM) and Project Accounts Coordination Meetings (PACM) conducted online on a monthly basis to monitor project and programme level activity and financial progress.

COAST has an independent Internal Audit System and Department led by the Assistant Director-Internal Audit (IA), who reports to management and the Executive Director, as well as to the quarterly Finance & Audit Committee meeting chaired by the Board Treasurer. Audit reports include financial management, internal controls, donor compliance and budget variance and are reviewed directly by the ED.

Financial and programme risks are monitored by the Audit Department and the Monitoring Department respectively. Both departments are supervised by a Director- ME&IA (Monitoring Evaluation & Internal Audit), who is also directly reportable to the ED. Organisational-level risk is managed at the ED level.

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### **3.4 Work with partner organisations**

COAST receives funding from donors, or generates its own income, and self-implements most projects. COAST does work with other local organisations in advocacy and emergency response programmes, as both a contracting and contracted partner. The former have not been included in project site selections and audit samples to date.

COAST does not yet have a partnership policy, and existing due diligence and contracting processes do not include quality and accountability requirements as defined in the CHS, for example a code of conduct or a complaint handling mechanism. COAST's Safeguarding Policy states "Agreements with partners will include a statement that partners who do not have a safeguarding policy will either abide by COAST policy or develop their own as a condition of the partnership" but this is not reflected in current partner agreements.

COAST also considers donor organisations such as UNICEF to be partners, as COAST implements programmes that are mutually conceived and planned.

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## **4. Overall performance of the organisation**

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### **4.1 Effectiveness of the governance, internal quality assurance and risk management of the organisation**

COAST's overall internal quality assurance and risk management score is 2.7, with examples of strong performance against the relevant CHS indicators relating to these requirements.

COAST has the capacity to implement sufficient controls on key areas of the CHS. Rolling operational plans ensure that implementation delays, underspends or overspends are addressed as quickly as possible. COAST's strong system of line management and a regular

programme of internal meetings support learning as well as budget- and programme-monitoring.

COAST has multiple detailed control mechanisms to ensure that its use of financial resources is effective, efficient and ethical. The IA Department completes at least one audit at branch and project level every six months, as well as surprise or unplanned audits if risks or complaints emerge. A bi-monthly IAM meeting is conducted with all IA Department staff to discuss internal audit findings, set strategies to address challenges and share learnings.

Internal audits detect unexplained transactions and either quickly rectify mistakes and ensure corrective actions including training (at the individual or group level through the PACM), or trigger investigations and disciplinary and/or legal processes. Audit findings are shared at management and Board levels and at the branch/project implementation unit level where a mutually agreed timeframe is established to address findings.

COAST's quality management systems have improved year-on-year, and the current strategy review process identifies areas of achievement (for example evaluation processes) as well as areas for improvement (such as outcome-level monitoring).

Information about programme risks is intended to be collected and reassessed on a quarterly basis including beneficiary feedback and risk assessments, as a standing item in the PPMM agenda. Current processes do not consistently elicit the required information from communities, and areas for improvement include strengthened risk assessments and uptake of more diverse on-site monitoring methodologies to support pre-emptive identification of unintended negative effects and emergent poor performance. On-site monitoring is also not yet systematically assessing and updating context changes or technical achievements in projects.

Other aspects of quality assurance that have been strengthened throughout the audit cycle include more systematic evaluation processes and sharing findings with and between teams as they emerge, although this system does not currently ensure that learning is available over time and to all staff.

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#### **4.2 How the organisation applies the CHS across its work**

Quality and accountability feature in COAST's Strategic Plan 2020-2024, including as a responsibility held by senior management alongside a commitment of staff time and financial resources for a strong MEAL Department and improved practice among staff. COAST's Executive Director and Senior Management Team are directly engaged in the application of the CHS to COAST's practice and programmes, with the support of the Board of Trustees.

The Initial Certification Audit in 2017 identified areas of strong performance that continue through to this Recertification Audit. COAST excels in co-ordinating assistance with other actors and ensuring that communities receive complementary assistance. It hosts and participates in local and national NGO networks for advocacy as well as coordination and learning. COAST has strong relationships with local and district level authorities, ensuring its programmes are aligned to local priorities.

The values of the organisation are clear in the programmes offered and the motivation of the staff. The commitment to transparent information sharing is exceptional (although some categories of information on the website (ie meeting minutes) are not up to date).

COAST's independent financial situation and network of microfinance programme staff enables it to respond immediately to localised disasters and emergencies. Its advocacy work prioritises issues that reinforce the overall purpose of the organisation, supporting sustainable

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and equitable development and the realisation of rights for poverty-affected communities. The core microfinance programme is implemented according to detailed policies and guidance.

In the non-core programmes, operational guidelines are not in. Currently, some requirements of the CHS are “unattended to” in guidance for staff. Likewise, some templates and policies are not systematically and comprehensively “joined up”, for example the complaints handling process and procurement policy are documented across several different policies or different versions of the same policy.

The strategy to resolve the corrective action request (CAR) that was identified in the Mid-term audit has been to ensure requirements are documented and to share changes through email circulars and staff meetings. While this supports the step of communicating required change, more detailed guidance for staff, ongoing refreshers and monitored action plans for systematic roll-out of changes may increase the success of embedding changes in practice at the project level. The process of rolling out exit strategy development from the programme design stage is ongoing, with ‘retrofit’ strategies articulating plans for sustained impact after projects end. This has led to the closure of the CAR from the Mid-term Audit.

A trend that continues from the work COAST has put into resolving CARs between the Initial Audit and the Mid-term audit is the introduction of process improvements that are not yet systematically reflected in changes to practice. At the Recertification Stage of the audit cycle, sustained changes have taken hold with some CHS requirements, while there are still gaps in others.

The political and social context in COAST’s operational areas is not always conducive to complaints being laid. COAST complements its investment in promoting complaints mechanisms and encouraging complaints with other structures that promote feedback from beneficiaries including quarterly focus group discussions (FGDs) and committee structures to encourage feedback, input and complaints from beneficiaries. Conversations with staff reflected a strong knowledge of the complaint response mechanism and an organisational culture that values feedback to improve.

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### 4.3 PSEA

COAST scores 2.5 across a number of indicators related to the prevention of and protection from sexual exploitation and abuse (PSEA), signalling the issue still needs some attention.

Multiple policies, processes and guidance address COAST’s PSEA requirements, however there is room to improve systematic and accessible information provision around PSEA with communities.

COAST policies support community consultation and engagement of different groups in programme design and implementation, however risk assessments do not systematically include this. Safety within communities, and contextual constraints relating to sexual exploitation, abuse and harassment (SEAH), are not systematically identified, analysed and mitigated.

COAST’s Code of Conduct explicitly includes SEAH and protection of children and vulnerable people. Widespread knowledge of, and adherence to, the CoC contributes to people’s safety, security, dignity and rights, and the prevention of SEAH by staff.

The organisation welcomes and addresses complaints, and the complaint handling process is documented and in place. COAST manages serious complaints, in particular, in a manner that prioritises the safety of all those affected.



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#### 4.4 Localisation

COAST's weighted score on indicators representing localisation in the CHS is 2.5.

Localisation is found in clear organisational values, and in the motivation of staff. COAST's commitment to the localisation agenda is evident in advocacy and media released from the organisation, as well as in the development of local leadership and capacity and engagement and consultation with communities and people affected by crisis.

COAST ensures inclusion of communities at all stages of a programme, although making information accessible to all members of the community is an area for improvement. Programmes focus on the resilience of communities, in particular ensuring local capacity for hazard mitigation and crisis response.

COAST develops and maintains effective working relationships with local authorities to ensure their work is relevant, complementary and coordinated. COAST's commitment to the localisation agenda includes ongoing advocacy, nationally and internationally, evident in resource planning as described in the Strategic Plan 2020-2024.

Areas for improvement include consideration of potential negative effects on local communities, economies and the environment prior to implementation. For example, systematic risk assessments in the design stage do not identify or mitigate environmental impacts of livelihoods projects where activities involve natural resources and the environment.

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#### 4.5 Gender and diversity

Another cross-cutting theme that is represented by a number of indicators across different commitments is gender and diversity. COAST's weighted average score is 2.0, signalling opportunities to continue improving.

COAST's commitment to issues related to gender for staff and communities is evidenced by actions in the organisation and in programmes that are intended to address harmful social and cultural attitudes. COAST's organisational values support positive discrimination to rectify current inequalities. COAST's Gender Policy outlines multiple proactive measures to ensure women's safe and equitable access to work opportunities. Regional Gender Focal Points report into the Gender Focal Point at the Principal Office. Regular gender and PSEA related meetings and trainings ensure all staff have a safe forum to express concerns, and all staff understand the organisational culture and efforts to overcome inequality.

COAST's HR Policy outlines a number of strategies and actions to facilitate the employment, safety and security of women in office and field positions. Female to male staff ratios are approximately 30:70 (473/1462 at the Recertification Audit), which is an increase on the 20:80 at the organisation's inception. There remain fewer women in COAST's Management structure compared to the number of women at other levels of the organisation.

At the programme level, guidance on disaggregation of data is not as strong as practice. Inaccessible information primarily affects more marginalised people, including women. Assessment of SEAH risks and vulnerabilities, and safety and security for different groups in each programme is not systematic.

## 4.6 Organisational performance against each CHS Commitment

Commitment	Strong points and areas for improvement	Feedback from communities	Average score*
<b>Commitment 1:</b> Humanitarian assistance is appropriate and relevant	<p>COAST policies and values commit to providing impartial assistance. COAST undertakes appropriate analysis of needs and vulnerabilities to inform programme design and meet those needs. COAST adapts programmes to changing needs and takes into account the vulnerabilities and diversities of communities.</p> <p>However, COAST does not have processes to guide ongoing analysis of the context and risk assessments are not systematic in design and implementation stages. Policies do not ensure systematic disaggregation of data across all programmes.</p>	<p>Communities state that COAST designs and implements appropriate programmes based on their needs. Trainings and information meet their needs and supports improved capacity.</p>	2.2
<b>Commitment 2:</b> Humanitarian response is effective and timely	<p>COAST delivers humanitarian response effectively and maintains close working relationships with local authorities and other responding agencies, to respond in a timely manner. These relationships also allow referral of unmet needs to relevant organisations.</p> <p>COAST monitors activities and outputs, including advocacy achievements, both on-site and off-site, in regular Project Progress Monitoring Meetings and through reporting. Financial tracking ensures implementation according to project workplans.</p> <p>Areas for improvement include outcome-level monitoring, programmes based on systematic risk analysis related to vulnerabilities, and improved understanding of technical standards when implementing and assessing programmes.</p>	<p>Communities express satisfaction that COAST makes decisions in a timely manner, without delays. They feel that COAST activities are safe for children and users. Communities state that COAST is transparent about what it can and cannot do, and when it cannot meet their needs, they are referred to other organisations.</p>	2.6
<b>Commitment 3:</b> Humanitarian response strengthens local capacities and avoids negative effects	<p>COAST is committed to localisation as an imperative to achieving its mission. Resilience and DRR are components of most programmes, in order that communities develop and strengthen local capacities and become first responders in disasters. COAST works in close cooperation with local government, including in disaster preparedness and disaster response.</p> <p>COAST's Code of Conduct, policies on PSEA, risk assessment and safeguarding demonstrate an organisational commitment to avoiding negative effects. COAST's system to identify actual unintended negative effects through quarterly beneficiary feedback FGDs / group</p>	<p>Communities confirm engagement in assessing local hazards and risks, and to participating in disaster risk reduction activities.</p> <p>Community members feel more able to take lead roles in local level decision making processes and in responding to emergencies.</p> <p>Communities indicate that COAST programmes do not cause negative effects.</p>	2.5

	interviews demonstrates a commitment to inclusion of beneficiary voices in programming, however the methodology does not enable a preventive approach to unintended negative effects (ie identification before harm occurs).		
<b>Commitment 4:</b> Humanitarian response is based on communication, participation and feedback	<p>COAST is committed to providing information to, communicating with, and gaining feedback from participants and stakeholders. This is documented in a range of policies, including a Communications Policy, and guided by Values around participation, equality, transparency and accountability.</p> <p>COAST's culture of open communication is reflected in its website which is used as a key communication tool for both internal and external stakeholders.</p> <p>COAST's policies and processes include the right for people influenced or affected to participate in decision making. Program designs are guided by community-informed priorities and recommendations. Inclusive representation is monitored, including through the use of a Monthly Progress and Data Segregation Report.</p> <p>Structured and systematic processes are in place to gain feedback from beneficiaries, including through quarterly beneficiary feedback (through focus group discussions and interviews), formation of representative committees and meetings with community members. There are opportunities to standardise some of these existing practices and strengthen the analysis of feedback that COAST receives from communities.</p>	<p>Community members state COAST maintains open and respectful communication and articulate an awareness of the organisation and its programmes.</p> <p>They express satisfaction with COAST's engagement with communities and opportunities to participate and provide feedback.</p>	2.4
<b>Commitment 5:</b> Complaints are welcomed and addressed	<p>COAST's processes to welcome and address complaints are documented in a Complaints and Response Mechanism (CRM) Policy and a PSEA Policy.</p> <p>COAST's commitment, policy and practices to welcome and accept complaints are well socialised throughout the organisation. COAST actively promotes complaints mechanisms to participants and the community, including on multi-lingual business cards and posters displaying phone numbers to male and female contact points.</p> <p>COAST has a range of avenues for complaints to be made. Systems to address complaints are supported by a Complaints Response Standing Committee. Complaints are documented in complaints registers which are consolidated in</p>	<p>Communities confirm they are aware of how to make a complaint and were happy with the complaint mechanisms available.</p>	2.6

	<p>a report and reviewed at monthly CRM meetings.</p> <p>There are opportunities to strengthen how these practices are sustainably embedded at a policy level.</p>		
<p><b>Commitment 6:</b> Humanitarian response is coordinated and complementary</p>	<p>COAST assigns staff resources and time to ensure effective participation and relationships with other stakeholders. COAST maintains presence in multiple global platforms for the purposes of advocacy, learning and sharing. COAST takes a leadership role in national and local NGO advocacy and response networks.</p> <p>COAST participates in a range of national and local / sector coordination mechanisms to ensure that it complements responses by other actors. Local leaders and authorities are consulted to ensure that strategies are in line with local priorities.</p> <p>COAST staff map stakeholder capacities, interests and feedback in project design and implementation processes, annual learning reviews and advocacy campaigns.</p> <p>Areas for improvement include supporting partners to implement the CHS.</p>	<p>Communities did not report any duplication between COAST's activities and those of other organisations active in Cox's Bazar.</p>	3
<p><b>Commitment 7:</b> Humanitarian actors continuously learn and improve</p>	<p>COAST's MEAL Policy ensures evaluation and learning practices are in place and outlines the processes and tools to record knowledge and experience. COAST demonstrates that it makes changes based on learnings from internal and external information sources.</p> <p>COAST contributes to learning and innovation amongst local, national and international peers and within the humanitarian sector.</p> <p>Learning is shared within COAST and with communities and people affected by crisis through ongoing engagement including meetings, newsletters and updates on its website. An area for improvement is expanding access to evaluation reports.</p>	<p>Community members report that COAST makes changes on the basis of participants input and feedback.</p>	2.8
<p><b>Commitment 8:</b> Staff are supported to do their job effectively, and are treated fairly and equitably</p>	<p>COAST has the Management and staff capacity to deliver its programmes. Staffing policies, procedures and guidelines are consolidated in an HR Manual.</p> <p>COAST supports staff to do their job, develop capacity and understand expectations on them. A Terms of Reference for each position sets out responsibilities and expected performance</p>	<p>Communities report not having any concerns regarding staff capacity, and consistently express positive feedback on their interactions with COAST staff.</p>	2.8

	<p>standards. Staff Performance Appraisals occur annually.</p> <p>A Code of Conduct documents the expected professional behaviours of COAST staff, interns and volunteers and commits them to being respectful and accountable to beneficiaries.</p> <p>COAST has policies and processes for staff recruitment, induction and ongoing training to support staff to improve their skills and competencies. An area for improvement is to further strengthen inclusive recruitment practices.</p> <p>A Security Management and Staff Wellbeing Policy is in place and staff articulated COAST practices that promote staff safety, including when travelling and working at project sites.</p>		
<p><b>Commitment 9:</b> Resources are managed and used responsibly for their intended purpose</p>	<p>COAST manages resources responsibly and for their intended purpose, with appropriate policies and processes in place.</p> <p>The control environment in COAST includes prevention (e.g. separation of duties), detection (e.g. internal audits) and corrective controls. COAST's monthly budget burn-rate monitoring and Project Account Coordination Meetings ensure accountable, on-time expenditure and compliance with financial rules and regulations.</p> <p>COAST's Green Policy seeks to minimise the carbon footprint of COAST's operations, and COAST monitors resource use.</p> <p>Areas for improvement include consideration of the impact on the environment of local and natural resource use, including in different project activities (for example agriculture, livestock or aquaculture).</p>	<p>Communities confirm that COAST uses resources to achieve the intended purpose and responds to requests based on emergent needs.</p>	2.7

\* *Note: Average scores are a sum of the scores per commitment divided by the number of indicators in each Commitment, except when one of the indicators of a commitment scores 0 or if several scores 1 on the indicators of a Commitment lead to the issuance of a major non-conformity/ weakness at the level of the Commitment. In these two cases the overall score for the Commitment is 0.*

## 5. Summary of non-conformities


Corrective Action Requests (CAR)*	Type	Resolution due date	Date closed out
2022-1.5: COAST's commitment to collect disaggregated data is not consistently stated in policy documents for all programmes	Minor	2023/06/22	
2022-3.6: COAST does not identify potential negative effects in a timely and systematic manner.	Minor	2025/06/22	

2022–8.5: COAST's HR Policy and practices do not consistently promote a fair, non-discriminatory and inclusive workforce.	Minor	2023/06/22	
<b>Total Number</b>	<b>3</b>		

## 6. Sampling recommendation for next audit

<b>Sampling rate</b>	The application of HQAI standard sampling rates is appropriate for the next audit, based on the confirmed number of active projects and implementing partners at the time.
<b>Additional recommendations</b>	<p>Based on the audit results, it is recommended that a project being implemented, in whole or in part, by a partner organisation be included in the next audit sample, focusing on both key actions and organisational responsibilities around partnership and the CHS.</p> <p>It is recommended that the maintenance audit in one year is onsite. It is also recommended that an experienced female interpreter be included in the onsite process. Finally, it will be important to establish, between the audit team and the organisation, an appropriate level of preparation for the staff and communities selected for interviews.</p>

## 7. Lead auditor recommendation

<p>In our opinion, COAST has demonstrated that it continues to conform with the requirements of the Core Humanitarian Standard on Quality and Accountability.</p> <p>Based on the evidence obtained, we confirm that we have received reasonable assurance that the organisation has implemented the necessary actions to close the minor CAR identified in the previous audit and continues to meet the requirements of the Core Humanitarian Standard.</p> <p>We recommend maintenance of certification.</p>	
<p><b>Name and signature of lead auditor:</b></p>  <p>Nik Rilko</p>	<p><b>Date and place:</b></p> <p>6 June, 2022 Radium Hot Springs, Canada</p>

## 8. HQAI decision

<b>Certificate:</b>	
<input checked="" type="checkbox"/> Certification maintained <input type="checkbox"/> Certificate suspended	<input type="checkbox"/> Certificate reinstated <input type="checkbox"/> Certificate withdrawn
<b>Next audit:</b> Surveillance audit before 2024/01/07	
<b>Name and signature of HQAI Executive Director:</b>  Jobst Mönks	<b>Date and place:</b> 20th July 2022, Geneva

## 9. Acknowledgement of the report by the organisation

<b>Space reserved for the organisation</b>	
Any reservations regarding the audit findings and/or any remarks regarding the behaviour of the HQAI audit team:  <i>If yes, please give details:</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Acknowledgement and Acceptance of Findings:</b> I acknowledge and understand the findings of the audit  I accept the findings of the audit	<input type="checkbox"/> Yes <input type="checkbox"/> No  <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Name and signature of the organisation's representative:</b>	<b>Date and place:</b>

## Appeal

In case of disagreement with the decision on certification, the organisation can appeal to HQAI within 14 days after being informed of the decision. HQAI will investigate the content of the appeal and propose a solution within 10 days after receiving the appeal.

If the solution is deemed not to be satisfactory, the organisation can inform HQAI in writing within 30 days after being informed of the proposed solution, of their intention to maintain the appeal.

HQAI will transmit the case to the Chair of the Advisory and Complaint Board who will constitute a panel made of at least two experts who have no conflict of interest in the case in question. These will strive to come to a decision within 30 days.

*The details of the Appeals Procedure can be found in document PRO049 – Appeal Procedure.*

## Annex 1: Explanation of the scoring scale\*

Scores	Meaning: for all verification scheme options	Technical meaning for all independent verification and certification audits
0	Your organisation does not work towards applying the CHS commitment.	<p><b>Score 0:</b> indicates a weakness that is so significant that the organisation is unable to meet the commitment. This leads to:</p> <ul style="list-style-type: none"> <li>• <b>Independent verification:</b> major weakness;</li> <li>• <b>Certification:</b> major non-conformity, leading to a major corrective action request (CAR) – No certificate can be issued or immediate suspension of certificate.</li> </ul>
1	Your organisation is making efforts towards applying this requirement, but these are not systematic.	<p><b>Score 1:</b> indicates a weakness that does not immediately compromise the integrity of the commitment but requires to be corrected to ensure the organisation can continuously deliver against it. This leads to:</p> <ul style="list-style-type: none"> <li>• <b>Independent verification:</b> minor weakness</li> <li>• <b>Certification:</b> minor non-conformity, leading to a minor corrective action request (CAR).</li> </ul>
2	Your organisation is making systematic efforts towards applying this requirement, but certain key points are still not addressed.	<p><b>Score 2:</b> indicates an issue that deserves attention but does not currently compromise the conformity with the requirement. This leads to:</p> <ul style="list-style-type: none"> <li>• <b>Independent verification and certification:</b> observation.</li> </ul>
3	Your organisation conforms to this requirement, and organisational systems ensure that it is met throughout the organisation and over time – the requirement is fulfilled.	<p><b>Score 3:</b> indicates full conformity with the requirement. This leads to:</p> <ul style="list-style-type: none"> <li>• <b>Independent verification and certification:</b> conformity.</li> </ul>
4	Your organisation's work goes beyond the intent of this requirement and demonstrates innovation. It is applied in an exemplary way across the organisation and organisational systems ensure high quality is maintained across the organisation and over time.	<p><b>Score 4:</b> indicates an exemplary performance in the application of the requirement.</p>

\* Scoring Scale from the CHSA Verification Scheme 2020